



Notice of Service Interruption/Area Closure
Western University
Facilities Management
Client Services 519-661-3304 (fmhelp@uwo.ca)

Submit by E-mail
 Print Form

Date of Interruption/Closure: Time(s):

Building(s) Affected: #1 #2
 #3 #4

Areas/Rooms Affected Alternate Route/Service:

Service to be interrupted: #1 #2
 #3 #4

Description/Reason for Project:

Requester: Date of Request:

Supervising Tradesperson: Unit:

Trade Supervisor: Unit: Date:

Contractor: Phone #:

Coordinator/Project Manager: Phone #: Date:

Reviewed by Trade Supervisor(s)/Shop(s) Affected:

Name: <input type="text" value="Plumber / Fitter Shop"/>	Date: <input type="text" value="Jan 26, 2016"/>	Name: <input type="text" value="WES Control"/>	Date: <input type="text" value="Jan 26, 2016"/>
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Signature/Stamp: <input type="text" value="P. De..."/>	Signature/Stamp: REVIEWED <small>By Jesse Atkinson (jatkin48@uwo.ca) at 2:10 pm, Jan 26, 2016</small>
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Name: <input type="text" value="Electrical / Mechanical Shop"/>	Date: <input type="text" value="Jan 26, 2016"/>
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Signature/Stamp: APPROVED <small>By Steve MacKay (smackay@uwo.ca) at 2:42 pm, Jan 26, 2016</small>	Principal Occupants:	
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Name: <input type="text"/>	Ext.:	Date:
Name: <input type="text"/>	Ext.:	Date:
Name: <input type="text"/>	Ext.:	Date:
Name: <input type="text"/>	Ext.:	Date:

Approval to Proceed: Date:

Signature/Stamp: <input type="text"/>	APPROVED <small>By Dan Trudgeon (fminterr@uwo.ca) at 9:24 am, Jan 28, 2016</small>
Name: <input type="text"/> Date: <input type="text"/>	

Notes:

